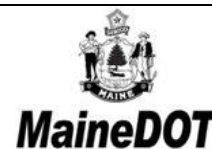




APPLICATION FOR ATV ACCESS ROUTE PERMIT
MAINE DEPARTMENT OF CONSERVATION
&
MAINE DEPARTMENT OF TRANSPORTATION



Off-Road Vehicle Division
Office of Parks and Land
22 State House Station
Augusta, ME 04333

Phone: (207)-287-4958 FAX: (207)-287-8111

Application
No. _____

Date Received: _____

Application is hereby made to construct an ATV Access Route in accordance with Title 12 M.R.S.A. §13157-A

Section A
ATV
Club
Information

1. Do you represent a Department of Conservation authorized ATV Club? ☐ YES ☐ NO

2. Is this permit for a Department of Conservation authorized ATV trail? ☐ YES ☐ NO

If you answered No to questions 1or 2 you are not eligible for an ATV Access Route.

3. ATV Club's Name: _____

4. ATV Club's Mailing Address: _____
Address Town/City State

5. ATV Club's Authorized Agent/Contact : _____
Name Title

6. Applicant or Agent's Mailing Address: _____
Address Town/City State

7. Contacts Daytime Telephone: _____ Alternate Phone # _____ Work _____ Cell _____

8. Signature: _____

Section B
ATV Access
Route
Location
Information

9. Directions to trail from nearest intersection: _____

10. Route No. _____ Road Name: _____

11. ☐ North ☐ South ☐ East ☐ West – side of highway

12. City/Town: _____ County: _____

13. Distance from nearest intersection: 1st trail head inter. _____ 2nd trail head inter. _____
Name of Intersection: _____
(estimated in tenths of a mile)

14. Nearest Utility Pole #: _____

15. How far does proposed ATV Access Route run along the roadway? _____

Proposed Location of entering and exiting trail heads shall be staked and flagged by applicant.

Do not fill out form below this line.

Section C
Department of
Conservation
Information

16. Department of Conservation authorized ATV Club? ☐ YES ☐ NO

17. Does Access Route go from Department Of Conservation authorized trail head to trail head? ☐ YES ☐ NO

18. Has ATV Club exhausted all reasonable alternatives to ATV Access Route? ☐ YES ☐ NO

Section D
Department of
Transportation
Information

19. Route Log Mile Location: Begin RLM _____ End RLM _____ -

20. Access Route Location: ☐ Roadway Shoulder ☐ Fore-slope ☐ Back-slope ☐ Other _____

21. Will construction be needed within the state's right of way to make trail stable? ☐ YES ☐ NO

22. Signage needed? ☐ YES ☐ NO If yes, How many? _____

23. Issue Permit? ☐ YES ☐ NO If No, please explain _____

